

entitlement to publicly funded care on the basis of a diagnosis remains unique in the American setting, where so much public medical care is either means or age tested.

Dialysis, even if someone else pays, is a terrible commitment of three or more four-hour sessions each week just to maintain some semblance of normalcy, and there is the constant threat of complications. There are also real problems with renal transplantation, but for many, that procedure offers the best hope for normal kidney function, and through that, normal social life. Peitzman takes his readers through both the science and the clinical and ethical issues of transplantation. As a nephrologist himself, he knows the medicine from the inside, and has great empathy for the patients he has spent his professional career treating. His mix of science and suffering makes for a fine book, always readable and often moving.

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Gino L Di Mitri, *Storia biomedica del tarantismo nel XVIII secolo*, Florence, Leo S Olschki, 2006, pp. xxiii, 322, €34.00 (paperback 88-222-5508-9).

In this history of the medical, biological and social phenomenon of tarantism in the eighteenth century, Gino Di Mitri reconstructs the theories, debates, links and opposing views of savants, European and *Pugliesi* physicians, travellers, healers, patients and musicians at a crucial historical moment. At that time, opposition between the experimental knowledge of local physicians and the theoretical knowledge of academics—of which Di Mitri shows a profound understanding—became more and more relevant to the story of tarantism.

The first chapter presents an historical panorama of the doubts about, and the medical debate on, tarantism from the sixteenth century. Tarantism originated from the venom

of the tarantula, but was also a disease simulated by women (*carnevaletti delle donne*) in order to enjoy music and escape the difficulties of family life. Di Mitri widens his research on the European debate of the seventeenth and eighteenth centuries by drawing on the work of Etienne-François Geoffroy, Harald Vallerius and Luigi Desbouts. These authors pay most attention to the power of music, considered as a remedy for or antidote to the venom of tarantula.

In the second chapter, Di Mitri studies the links between entomology and medicine at the beginning of the eighteenth century, the debate on the action of the venom of the tarantula and the identification of the spider (*Lycosa tarentula* vs *Latrodectus tredecimguttatus*). As he makes clear, the controversy about the real or simulated effects of tarantism was centred in experience. Physicians from Puglia, where the disease was widespread, testified that it was a real physical state seen with their own eyes. The original meaning of *autopsia* could be used to show the contrast between those who wrote about the disease only *ex auditu* and those who wrote *ex visu* and because of *didici, reperi, comperi* and so on.

Visual evidence of the disease becomes a major concern in the third chapter, in which the opposing views of two eighteenth-century physicians—Niccolò Caputi and Francesco Serao—are presented as examples of the changes in scientific thought. Di Mitri analyses the life and works of Caputi, a physician active in Puglia (Lecce) and husband of the *tarantata* Beatrice De Cesare. The medical cases narrated by Caputi can be used to show that there was no hiatus between the official medicine of the Enlightenment and the empirical and popular medical practice of music-therapy. But Caputi was a local physician who believed in the real action of the tarantula's venom, while Serao was a foreigner who attributed the disease to the prevailing melancholy of the inhabitants of Puglia. Francesco Serao is the model of the physician who never experienced the disease: he wrote his *Lezioni* in the Neapolitan academic milieu of theoretical knowledge: a

theoretical knowledge so strong that it undermines even the visual testimony of the reality of the phenomenon. In fact, Serao cited two letters by an anonymous physician from Lecce in order to transform the phenomenon from poisoning to a melancholic disease; he did not deny its existence, merely changed its aetiology. Paradoxically, there was more scepticism in Baglivi's *carnevaletti delle donne* than in Serao's tarantism.

The fourth and final chapter deals with the Linnaean milieu of such authors as François Boissier de Sauvages, Charles Linnaeus, Mårten Kälher, Antonio Maria Minasi and Johann Christian Fabricius. The debate on the classification of the spider and the disease in the realm of nature led to the identification of the real venomous spider, the *Latrodectus tredecimguttatus*, by Pietro Rossi in 1790.

In this last chapter, the dialogue between ancient sources and critical bibliography produces one of the book's most important conclusions. Di Mitri underlines the continuity between past and present: observations of eighteenth-century physicians, healers and travellers could be said to anticipate the idea of tarantism found in twentieth-century psychiatric, ethnologic, anthropologic and social literature. This is the case of the concept of *transe* and of the ethno-psychiatric clinical interpretation of the phenomenon. Nevertheless, Di Mitri does not forget that he is writing a book on the history of tarantism. In fact, the historical turning point of the ecstatic and enthusiastic behaviour of *tarantati* is the crucial advent of the Catholic Counter-Reformation in Puglia, a country characterized by the Greek rite. Thus, the last contribution of tarantism to the eighteenth century was the foundation of a syncretic system of treatment based on the three pillars of religion, magic and medicine.

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Roberta Bivins and John V Pickstone
(eds), *Medicine, madness and social history:*

essays in honour of Roy Porter, Basingstoke, Palgrave Macmillan, 2007, pp. x, 295, illus., £55.00 (hardback 978-0-230-52549-8).

Visiting Glasgow in 1997, Roy Porter was asked by an awestruck colleague the mortifyingly pretentious question, "Are you the real 'Roy Porter' or a simulacrum?" Sadly, of course, that is all we can now have: a copy for which no original ever existed, refracted through our own perceptions. However, this collection does a tremendously good job of summoning an image of Porter's interests and methods in the social history of medicine and their impact. In addition, personal recollections show the lasting impression a generous human being made on many hearts, minds, and careers.

That stress on the contribution of the individual is, of course, also central to Porter's intellectual legacy. His focus was on people, their thoughts and activities. As Hal Cook argues in his candid historiographical appraisal, Porter was "neither the founder of a school of history nor an aspirant for such a role. His analyses were rooted in persons and moments rather than in structures" (p. 15). Porter, Cook suggests, was really a social historian of thought rather than of medicine. The mind of the age was centre stage: Porter was interested in how people conceived of themselves and their worlds, in the range of human experience, and in the emergence of ideas from "a variety of people and processes" (pp. 16–17). He wished to break down artificial and anachronistic divisions between medical ideas and other areas of social and cultural life. His trademark commitment to bringing neglected voices into the historical narrative—giving ordinary people back agency, rescuing them from victim status—made him seem part of a wider movement that became associated with socio-economic causal explanations.

The essays here certainly reflect these interests, in a Porterian parade of colourful outsider-individuals: past social historians, medical reformers, educational democratizers, dentists, cucumber-forcing gardeners,